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**POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO**

I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

Practitioners associated with the Customer Number:

24737

OR

Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):

| Name | Registration Number | Name | Registration Number |
|------|---------------------|------|---------------------|
|      |                     |      |                     |
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|      |                     |      |                     |

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:



The address associated with Customer Number:

24737

OR

|                          |                         |       |     |  |
|--------------------------|-------------------------|-------|-----|--|
| <input type="checkbox"/> | Firm or Individual Name |       |     |  |
| Address                  |                         |       |     |  |
| City                     |                         | State | Zip |  |
| Country                  |                         |       |     |  |
| Telephone                | Fax                     |       |     |  |

Assignee Name and Address:

KONINKLIJKE PHILIPS ELECTRONICS N.V.  
Groenewoudseweg 1  
5621 BA Eindhoven, The Netherlands

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

## SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

|           |   |                          |
|-----------|---|--------------------------|
| Signature |  | Date 14 January 2005     |
| Name      | Michael E. Marion   | Telephone (914) 333-9637 |
| Title     | Authorized Representative   |                          |

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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10/578718

IAP12 Rec'd PCT/PTO 10 MAY 2006

PTO/SB/96 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**STATEMENT UNDER 37 CFR 3.73(b)**

Applicant/Patent Owner: Koninklijke Philips Electronics N.V.

Application No./Patent No.: \_\_\_\_\_ Filed/Issue Date: Concurrently

Entitled: ADAPTATION OF CLODE-CAPTIONED TEXT BASED ON SURROUNDING VIDEO CONTENT

Koninklijke Philips Electronics N.V., a corporation  
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1.  the assignee of the entire right, title, and interest; or2.  an assignee of less than the entire right, title and interest.The extent (by percentage) of its ownership interest is \_\_\_\_\_ %  
in the patent application/patent identified above by virtue of either:

A. [v] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

**OR**

B. [ ] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

2. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

3. From: \_\_\_\_\_ To: \_\_\_\_\_  
The document was recorded in the United States Patent and Trademark Office at  
Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

[ ] Additional documents in the chain of title are listed on a supplemental sheet.

[ ] Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document)  
must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be  
recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

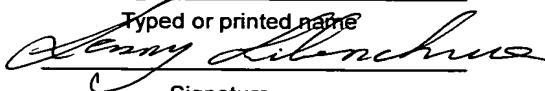
MAY 9, 2006

LARRY LIBERCHUK, REG. 40,352

Date

Typed or printed name

(914) 333-9602



Telephone number

Signature

Sr. Intellectual Property Counsel

Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted  Declaration Submitted after Initial With Initial Filing (surcharge (37 CFR 1.16 (e)) required)

|                          |                |
|--------------------------|----------------|
| Attorney Docket Number   | US030438       |
| First Named Inventor     | SRINIVAS GUTTA |
| <b>COMPLETE IF KNOWN</b> |                |
| Application Number       |                |
| Filing Date              |                |
| Group Art Unit           |                |
| Examiner Name            |                |

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ADAPTATION OF CLOSE-CAPTIONED TEXT BASED ON SURROUNDING VIDEO  
CONTENT**

the specification of which *(Title of the Invention)*

is attached hereto

OR

was filed on

**November 10, 2003**

as United States Application Number or PCT International

Application Number **60/518,924** and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) Country | Priority Not Claimed     | Certified Copy Attached?<br>YES | NO                       |
|-------------------------------------|---------|--|--------------------------|---------------------------------|--------------------------|
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/> |
|                                     |         |  | <input type="checkbox"/> | <input type="checkbox"/>        | <input type="checkbox"/> |

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.

Please type a plus sign (+) inside this box

Approved for use through 10/31/2002. OMB 0651-0032  
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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:  Customer Number or  
Bar Code Label**24737**OR  Correspondence address below

PATENT TRADEMARK OFFICE

**Name Philips Intellectual Property & Standards****Address 345 Scarborough Road  
P.O. Box 3001****City Briarcliff Manor State NY ZIP 10510-8001****Country USA Telephone 914-945-6000 Fax 914-332-0615**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

|   |          |                           |
|---|----------|---------------------------|
| Given Name<br>(first and middle [if any]) | Srinivas | Family Name<br>or Surname |
|---|----------|---------------------------|

|                           |        |
|---------------------------|--------|
| Inventor's ✓<br>Signature | Date ✓ |
|---------------------------|--------|

|                    |         |                 |       |
|--------------------|---------|-----------------|-------|
| 5631 CN, Eindhoven | State   | The Netherlands | India |
| Residence: City    | Country | Citizenship     |       |

**Penelopestraat 227  
Mailing Address**

|                    |         |         |                 |
|--------------------|---------|---------|-----------------|
| 5631 CN, Eindhoven | State   | Zip     | The Netherlands |
| City               | Country | Country |                 |

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

|   |                 |                           |
|---|-----------------|---------------------------|
| Given Name<br>(first and middle [if any]) | Petrus Gerardus | Family Name<br>or Surname |
|---|-----------------|---------------------------|

|                         |      |
|-------------------------|------|
| Inventor's<br>Signature | Date |
|-------------------------|------|

|                 |         |                 |                 |
|-----------------|---------|-----------------|-----------------|
| Eindhoven       | State   | The Netherlands | The Netherlands |
| Residence: City | Country | Citizenship     |                 |

**Graspakiet 36****Mailing Address**

|           |       |         |                 |
|-----------|-------|---------|-----------------|
| Eindhoven | State | 5658 AC | The Netherlands |
| City      | Zip:  | Country |                 |

Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box **DECLARATION — Utility or Design Patent Application**Direct all correspondence to:  Customer Number or  
Bar Code Label**24737**

OR

 Correspondence address below

PATENT TRADEMARK OFFICE

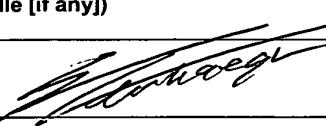
**Name Philips Intellectual Property & Standards****Address 345 Scarborough Road  
P.O. Box 3001****City Briarcliff Manor State NY ZIP 10510-8001****Country USA Telephone 914-945-6000 Fax 914-332-0615**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor**Given Name Srinivas Family Name GUTTA  
(first and middle [if any]) or Surname****Inventor's Signature Date****5631 CN, Eindhoven State The Netherlands India  
Residence: City Country Citizenship****Penelopestraat 227  
Mailing Address****5631 CN, Eindhoven State Zip The Netherlands  
City Country****NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor**Given Name Petrus Gerardus Family Name MEULEMAN  
(first and middle [if any]) or Surname****Inventor's Signature Date****Eindhoven State The Netherlands The Netherlands  
Residence: City Country Citizenship****Grasparkiet 36****Mailing Address****Eindhoven State Zip The Netherlands  
City Country** Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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**DECLARATION**
**ADDITIONAL INVENTOR(S)  
Supplemental Sheet**  
 Page 3 of 3

|   |       |   |                      |
|---|-------|---|----------------------|
| <b>NAME OF THIRD INVENTOR:</b>  |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                      |
| Given Name <b>Wilhelmus Franciscus Johannes</b><br>(first and middle [if any])  |       | Family Name <b>VERHAEGH</b><br>or Surname                                     |                      |
| Inventor's<br>Signature    |       |   | Date <u>19/04/06</u> |
| Eindhoven   | State | The Netherlands   | The Netherlands      |
| Residence: City   |       | Country   | Citizenship          |
| Zandtong 14<br>Mailing Address  |       |   |                      |
| Eindhoven   | State | 5658 <del>ED</del> AC   | The Netherlands      |
| City  |       | Zip   | Country              |
| <b>NAME OF FOURTH INVENTOR:</b>   |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                      |
| Given Name<br>(first and middle [if any])   |       | Family Name<br>or Surname   |                      |
| Inventor's<br>Signature   |       |   | Date                 |
| City  | State | Country   | Citizenship          |
| <b>Mailing Address</b>  |       |   |                      |
| City  | State | Zip   | Country              |
| <input type="checkbox"/> Additional inventors are being named on the ___ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto. |       |   |                      |

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